

**United States Bankruptcy Court
District of Oregon**

IN RE:Case No. **15-31963-pcm13****Crawford, Debra A.**Chapter **13**

Debtor(s)

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 502,000.00		
B - Personal Property	Yes	3	\$ 214,402.28		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	5		\$ 777,138.65	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 33,253.92	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	27		\$ 213,724.03	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	4			
I - Current Income of Individual Debtor(s)	Yes	2			\$ 7,800.00
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$ 5,500.43
TOTAL		49	\$ 716,402.28	\$ 1,024,116.60	

**United States Bankruptcy Court
District of Oregon**

IN RE:Case No. 15-31963-pcm13Crawford, Debra A.

Debtor(s)

Chapter 13**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 33,253.92
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 33,253.92

State the following:

Average Income (from Schedule I, Line 12)	\$ 7,800.00
Average Expenses (from Schedule J, Line 22)	\$ 5,500.43
Current Monthly Income (from Form 22A-1 Line 11; OR , Form 22B Line 14; OR , Form 22C-1 Line 14)	\$ 73,099.01

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 113,474.07
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 27,261.71	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 5,992.21
4. Total from Schedule F		\$ 213,724.03
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 333,190.31

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Personal Residence 15901 SW Oriole Ct Sherwood, OR 97140			502,000.00	556,336.57
TOTAL			502,000.00	

(Report also on Summary of Schedules)

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash on Hand		12.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		US Bank Checking Account (9225)		13,825.28
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, include audio, video, and computer equipment.		Household Goods, Furniture & Computer Equipment		2,000.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		Books, Pictures & Home Decor		200.00
6. Wearing apparel.		Clothing & Shoes		200.00
7. Furs and jewelry.		Jewelry		100.00
8. Firearms and sports, photographic, and other hobby equipment.		Exercise Equipment		100.00
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		The Ultimate Tan & Med Spa (100% ownership)		0.00
14. Interests in partnerships or joint ventures. Itemize.	X			

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Possible Claim against Deceased Husband's Brother (Stole Debtor's 2005 Forri Utility Trailer, value of \$1,000.00)		unknown
		Possible Future EIC Tax Income		unknown
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1973 Dodge Motorhome		2,000.00
		2005 Chevrolet Express Cargo Van		4,616.00
		2005 Forri Utility Trailer (stolen by deceased husband's brother) (possible claim)		0.00
		2006 Mercedes- Benz CLS Class (vehicle title in deceased husband's name) (auto loan balance of \$13,000) (vehicle is currently wrecked)		17,649.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		Business Office Equipment		4,200.00

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
29. Machinery, fixtures, equipment, and supplies used in business.		All Business Tanning Equipment (subject to secured lien of IRS)		31,000.00
30. Inventory.		Business Inventory & Supplies		15,000.00
31. Animals.		(1) Dog (no cash value)		0.00
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		All Laser Equipment Secured by Alma Lasers		24,000.00
		All Tanning Equipment Secured by Summit Leasing (equipment located at various business locations)		90,000.00
		Miracle Sun Leonardo 360HP		9,500.00
TOTAL				214,402.28

0 continuation sheets attached

(Include amounts from any continuation sheets attached.
Report total also on Summary of Schedules.)

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPTDebtor elects the exemptions to which debtor is entitled under:
(Check one box)☐ Check if debtor claims a homestead exemption that exceeds \$155,675. *

- ☒ 11 U.S.C. § 522(b)(2)
☐ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<u>SCHEDULE A - REAL PROPERTY</u>			
Personal Residence 15901 SW Oriole Ct Sherwood, OR 97140	11 USC § 522(d)(1)	11,475.00	502,000.00
<u>SCHEDULE B - PERSONAL PROPERTY</u>			
Cash on Hand	11 USC § 522(d)(5)	12.00	12.00
US Bank Checking Account (9225)	11 USC § 522(d)(5)	12,713.00	13,825.28
Household Goods, Furniture & Computer Equipment	11 USC § 522(d)(3)	2,000.00	2,000.00
Books, Pictures & Home Decor	11 USC § 522(d)(3)	200.00	200.00
Clothing & Shoes	11 USC § 522(d)(3)	200.00	200.00
Jewelry	11 USC § 522(d)(4)	100.00	100.00
2005 Chevrolet Express Cargo Van	11 USC § 522(d)(2)	3,675.00	4,616.00
All Business Tanning Equipment (subject to secured lien of IRS)	11 USC § 522(d)(6)	2,300.00	31,000.00

* Amount subject to adjustment on 4/1/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. unknown Alma Lasers Dr. Ziv Karni, president and CEO 485 Half Day Road # 100 Buffalo Grove, IL 60089		Security Agreement All laser equipment VALUE \$ 24,000.00				24,000.00	
ACCOUNT NO. 66CV American Express Company C/O Kenneth I. Chenault, CEO 200 Vesey Street New York, NY 10285		Judgment Against Personal Residence 15901 SW Oriole Ct. Sherwood, OR 97140 VALUE \$ 502,000.00				2,344.43	2,344.43
ACCOUNT NO. Lindsay K. Wostmann Attorney At Law - Modern Law 245 East 4th Ave Eugene, OR 97401		Assignee or other notification for: American Express Company VALUE \$					
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: American Express Company VALUE \$					
Subtotal (Total of this page)						\$ 26,344.43	\$ 2,344.43
Total (Use only on last page)						\$	\$

(Report also on
Summary of
Schedules.)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBITOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 03SC Asset Systems, Inc. C/O Michael G. Schindler, RA 4520 SE Belmont St, STE 280 Portland, OR 97215		Judgment Against Personal Residence 15901 SW Oriole Ct. Sherwood, OR 97140 VALUE \$ 502,000.00				2,021.34	2,021.34
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Asset Systems, Inc. VALUE \$					
ACCOUNT NO. SSN Attorney General of the United States C/O Loretta Lynch, Dept. Of Justice 10th & Constitution NW Washington, DC 20530	X	Federal Tax Liens VALUE \$ 698,753.28				33,575.72	
ACCOUNT NO. Internal Revenue Service Centralized Insolvency Operations POB 7346 Philadelphia, PA 19101-7346		Assignee or other notification for: Attorney General of the United States VALUE \$					
ACCOUNT NO. US Attorney For The District Of Oregon C/O Amanda Marshal, US Attorney 1000 SW 3rd Ave., Ste 600 Portland, OR 97204		Assignee or other notification for: Attorney General of the United States VALUE \$					
ACCOUNT NO. 26CV CitiBank, N.A. C/O Barbara Desoer, CEO 399 Park Avenue New York, NY 10022		Judgment Against Personal Residence 15901 SW Oriole Ct. Sherwood, OR 97140 VALUE \$ 502,000.00				3,516.63	3,516.63
Sheet no. <u>1</u> of <u>4</u> continuation sheets attached to Schedule of Creditors Holding Secured Claims						Subtotal (Total of this page) \$ 39,113.69	\$ 5,537.97
Total (Use only on last page)						\$	\$

(Report also on
Summary of
Schedules.)(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.		Assignee or other notification for:					
Citibank South Dakota		CitiBank, N.A.					
C/O Donald R. Markham, RA							
403 Lincoln							
Moro, OR 97039		VALUE \$					
ACCOUNT NO.		Assignee or other notification for:					
Suttell & Hammer, PS		CitiBank, N.A.					
POB C-90006							
Bellevue, WA 98009		VALUE \$					
ACCOUNT NO.		Assignee or other notification for:					
Washington County Circuit Court		CitiBank, N.A.					
150 N 1st Avenue							
Hillsboro, OR 97124		VALUE \$					
ACCOUNT NO. 8389		Mortgage on Personal Residence				501,000.00	
CitiMortgage, Inc.		15901 SW Oriole St.					
C/O CT Corporation System, RA		Sherwood, OR 97140					
388 State Street, Suite 420		(estimated arrears: \$11,500)					
Salem, OR 97301		VALUE \$ 502,000.00					
ACCOUNT NO. 81SC		Judgment Against Personal Residence				7,432.84	7,432.84
Columbia Collection Service, Inc.		15901 SW Oriole Ct.					
C/O Randall Welch, RA		Sherwood, OR 97140					
10888 SE Main St, Ste 200							
Milwaukie, OR 97222		VALUE \$ 502,000.00					
ACCOUNT NO.		Assignee or other notification for:					
David B. Schumacher		Columbia Collection Service, Inc.					
Attorney At Law							
3439 NE Sandy Blvd., Suite 239							
Portland, OR 97232		VALUE \$					
Sheet no. <u>2</u> of <u>4</u> continuation sheets attached to Schedule of Creditors Holding Secured Claims		Subtotal (Total of this page)				\$ 508,432.84	\$ 7,432.84
		Total (Use only on last page)				\$	\$

(Report also on
Summary of
Schedules.)(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

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Debtor(s)

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Columbia Collection Service, Inc.					
VALUE \$							
ACCOUNT NO. 0246 Metropolitan Agencies, Inc. C/O Kaye Fulmer, RA 316 N. Johnson McMinnville, OR 97128	X	Judgment Against Personal Residence 15901 SW Oriole Ct. Sherwood, OR 97140				2,611.00	2,611.00
VALUE \$ 502,000.00							
ACCOUNT NO. Yamhill County Circuit Court 535 E. 5th St. McMinnville, OR 97128		Assignee or other notification for: Metropolitan Agencies, Inc.					
VALUE \$							
ACCOUNT NO. 4433 Quick Collect Inc. C/O Ronald D. Thompson, RA 6308 SE Platt Ave Portland, OR 97236	X	Judgment Against Personal Residence 15901 SW Oriole Ct. Sherwood, OR 97140				3,834.61	3,834.61
VALUE \$ 502,000.00							
ACCOUNT NO. Clackamas County Circuit Court 807 Main Street Oregon City, OR 97045		Assignee or other notification for: Quick Collect Inc.					
VALUE \$							
ACCOUNT NO. Quick Collect Inc. POB 55457 Portland, OR 97238		Assignee or other notification for: Quick Collect Inc.					
VALUE \$							
Sheet no. 3 of 4 continuation sheets attached to Schedule of Creditors Holding Secured Claims	Subtotal (Total of this page)					\$ 6,445.61	\$ 6,445.61
	Total (Use only on last page)					\$	\$

(Report also on
Summary of
Schedules.)(If applicable, report
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Debtor(s)

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBITOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 7520 Summit Leasing, Inc. C/O Ken Mears PO Box 7 Yakima, WA 98907	X	Secured interest in various tanning equipment VALUE \$ 90,000.00				181,713.22	91,713.22
ACCOUNT NO. Farleigh Wada Witt Attorneys At Law 121 SW Morrison St., Suite 600 Portland, OR 97204		Assignee or other notification for: Summit Leasing, Inc. VALUE \$					
ACCOUNT NO. 9647 The Tanning Bed Company C/O Pamela E. Yee, RA 18525 SW Vincent Aloha, OR 97007	X	Secured interest in Miracle Sun Leonardo - 360HP VALUE \$ 9,500.00				7,048.86	
ACCOUNT NO. The Tanning Bed Company 14915 SW 72nd Ave Tigard, OR 97224		Assignee or other notification for: The Tanning Bed Company VALUE \$					
ACCOUNT NO. 9871 Washington County Tax & Assessment C/O Richard Hobernicht, Director 155 N 1st Ave Rm 130 Hillsboro, OR 97124	X	Personal Property Tax P2169871 VALUE \$ 194,141.28				8,040.00	
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Washington County Tax & Assessment VALUE \$					
Subtotal (Total of this page)						\$ 196,802.08	\$ 91,713.22
Total (Use only on last page)						\$ 777,138.65	\$ 113,474.07

Sheet no. 4 of 4 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

(Report also on
Summary of
Schedules.)

(If applicable, report
also on Statistical
Summary of Certain
Liabilities and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS (Continuation Sheet)

Taxes and Other Certain Debts Owed to Governmental Units

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. SSN Internal Revenue Service Centralized Insolvency Operations POB 7346 Philadelphia, PA 19101-7346		Federal taxes owed				3,515.30	3,290.73	224.57
ACCOUNT NO. SSN ODR - Bkcy 955 Center NE #353 Salem, OR 97301-2555		State Taxes Owed				15,566.95	15,089.05	477.90
ACCOUNT NO. SSN Oregon Employment Department 875 Union St. NE, RM 107 Salem, OR 97311		Payroll Taxes				14,171.67	8,881.93	5,289.74
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								

Sheet no. 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Totals of this page)

\$ **33,253.92** \$ **27,261.71** \$ **5,992.21**

Total

(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

\$ **33,253.92**

Total

(Use only on last page of the completed Schedule E. If applicable,
report also on the Statistical Summary of Certain Liabilities and Related Data.)

\$ **27,261.71** \$ **5,992.21**

IN RE **Crawford, Debra A.**

Debtor(s)

Case No. **15-31963-pcm13**

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Aluli Real Estate Holdings, Llc C/O Commercial Realty Advisors Nw, Llc 733 SW 2nd Ave, Ste 200 Portland, OR 97204	X	Precautionary				0.00
ACCOUNT NO. Commerical Realty Advisors NW, LLC 733 SW 2nd Ave., Ste 200 Portland, OR 97204		Assignee or other notification for: Aluli Real Estate Holdings, Llc				
ACCOUNT NO. Barrows Crossing, LLC C/O Edward Fitch, RA 210 SW 5th St., Ste 2 Redmond, OR 97756		Assignee or other notification for: Aluli Real Estate Holdings, Llc				
ACCOUNT NO. 4033 AMO Recoveries POB 926100 Norcross, GA 30010		Unpaid services				251.00

26 continuation sheets attached

Subtotal
(Total of this page) \$ **251.00**

Total
(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules and, if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7050 AMO Recoveries POB 926100 Norcross, GA 30010		Unpaid services				251.00
ACCOUNT NO. 2921 Anesthesia Associates NW, LLC POB 2817 Portland, OR 97208		Medical debt				496.00
ACCOUNT NO. Asset Recovery Group, Inc. C/O Michael G. Schindler, RA 4520 SE Belmont # 280 Portland, OR 97214		Assignee or other notification for: Anesthesia Associates NW, LLC				
ACCOUNT NO. Bank Of America POB 982235 El Paso, TX 79998-2235		Unpaid services				0.00
ACCOUNT NO. Bonneville Billing 1186 E 4600 S., Suite 100 Ogden, UT 84403		Assignee or other notification for: Bank Of America				
ACCOUNT NO. 0910 Blair & Vestigo Attorneys At Law 1800 Blankenship Rd., #475 West Linn, OR 97068		Attorney's fees				495.00
ACCOUNT NO. 71SC Bonneville Billing & Collections, Inc. C/O CT Corporation System, RA 388 State St., Ste 420 Salem, OR 97301		Washington County Circuit Court Small Claims, Case No. C125071SC				1,289.00

Sheet no. 1 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **2,531.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Michael G. Borge 207 E. 19th St Vancouver, WA 98663		Assignee or other notification for: Bonneville Billing & Collections, Inc.				
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Bonneville Billing & Collections, Inc.				
ACCOUNT NO. Bonstan Construction Company PO Box 32 Clackamas, OR 97015	X	Precautionary				unknown
ACCOUNT NO. 0667 Century Link PO Box 4300 Carol Stream, IL 60197-4300	X	Unpaid services				457.60
ACCOUNT NO. Convergent Outsourcing 800 SW 39th St. PO Box 9004 Renton, WA 98057		Assignee or other notification for: Century Link				
ACCOUNT NO. 812C Colusa Superior Court Court Executive Officer 532 Oak Street Colusa, CA 95932		Court fines				655.00
ACCOUNT NO. Municipal Services Bureau PO Box 16755 Austin, TX 78761-6755		Assignee or other notification for: Colusa Superior Court				

Sheet no. 2 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **1,112.60**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Comcast Business Services 7475 South Joliet St. Englewood, CO 80112		Unpaid services				292.00
ACCOUNT NO. Diversified Adjustment 600 Coon Rapids Blvd. Coon Rapids, MN 55432		Assignee or other notification for: Comcast Business Services				
ACCOUNT NO. unknown Cornelius Retail Center, LLC PO Box 906 Beaverton, OR 97075-0906	X	Business debt				0.00
ACCOUNT NO. Cornerstone Clinical Services, PC 6400 SE Lake Rd., Ste 325 Milwaukie, OR 97222		Medical debt				89.00
ACCOUNT NO. Crossroads Plaza Of Oregon, LLC PO Box 626 Wilsonville, OR 97070	X	Business lease debt				3,274.54
ACCOUNT NO. Department Of Human Services 800 NE Oregon Street, Ste 640 Portland, OR 97232	X	Business debt				1,600.00
ACCOUNT NO. 1081 Dr. HVAC 1788 NE 18th St. McMinnville, OR 97128	X	Business debt				2,415.61

Sheet no. 3 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **7,671.15**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Metropolitan Agencies, Inc. C/O Kaye Fulmer, RA 316 N. Johnson McMinnville, OR 97128		Assignee or other notification for: Dr. HVAC				
ACCOUNT NO. 63CV Folawn Alterman & Richardson, LLP C/O Karen Nashiwa 805 SW Broadway, Ste 2750 Portland, OR 97205	X	Judgment Awarded Washington County Circuit Court Case No. C13563CV				15,168.38
ACCOUNT NO. Folawn Alterman & Richardson, LLP C/O Corey Tolliver 805 SW Broadway, Ste 2750 Portland, OR 97205		Assignee or other notification for: Folawn Alterman & Richardson, LLP				
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Folawn Alterman & Richardson, LLP				
ACCOUNT NO. Karen Nashiwa 12847 SW 61st Ave Portland, OR 97219		Assignee or other notification for: Folawn Alterman & Richardson, LLP				
ACCOUNT NO. Law Offices Of Matthew Kehoe, LLC Attorneys At Law 330 NE Lincoln Street, Ste 200, POB 543 Hillsboro, OR 97123		Assignee or other notification for: Folawn Alterman & Richardson, LLP				
ACCOUNT NO. 8640 Fred Meyer Jewelers, Inc. C/O Corporation Service Co., RA 285 Liberty St., NE Salem, OR 97301		Precautionary				0.00

Sheet no. 4 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **15,168.38**

Total
(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. CitiBank POB 6235 Sioux Falls, SD 57117		Assignee or other notification for: Fred Meyer Jewelers, Inc.				
ACCOUNT NO. 7915 Frontier Communications POB 20550 Rochester, NY 14602	X	Unpaid services				328.16
ACCOUNT NO. EOS, CCA 700 Long Water Dr. Norwell, MA 02061		Assignee or other notification for: Frontier Communications				
ACCOUNT NO. Penn Credit POB 988 Harrisburg, PA 17108		Assignee or other notification for: Frontier Communications				
ACCOUNT NO. 6401 Gastroenterology Specialists Of OR 1508 Division Street, Ste 15 Oregon City, OR 97045		Unpaid services				2,250.00
ACCOUNT NO. Quick Collect Inc. POB 55457 Portland, OR 97238		Assignee or other notification for: Gastroenterology Specialists Of OR				
ACCOUNT NO. unknown Gastroenterology Specialists Of OR 1508 Division Street, Ste 15 Oregon City, OR 97045		Medical debt				1,746.00

Sheet no. 5 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **4,324.16**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Quick Collect Inc. POB 55457 Portland, OR 97238		Assignee or other notification for: Gastroenterology Specialists Of OR				
ACCOUNT NO. 2d02 GD Sherwood 20673 SW Roy Rogers Rd Sherwood, OR 97140		Medical debt				255.00
ACCOUNT NO. 9410 GE Capital POB 103104 Roswell, GA 30076	X	Credit card				481.40
ACCOUNT NO. CAC Financial Corp 2601 NW Expressway, Ste 1000 East Oklahoma City, OK 73112		Assignee or other notification for: GE Capital				
ACCOUNT NO. Lowes POB 965006 Orlando, FL 32896		Assignee or other notification for: GE Capital				
ACCOUNT NO. Cavalry Portfolio Services 500 Summit Lake Dr., Suite 4A Valhalla, NY 10595		Assignee or other notification for: GE Capital				
ACCOUNT NO. 25CV Global Electric, Inc. C/O Justin Spiering, RA 15354 NW Mead LN North Plains, OR 97133	X	Precautionary				0.00

Sheet no. 6 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **736.40**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Kit A. Jensen, Attorney At Law 217 E. Main, PO Box 157 Hillsboro, OR 97123		Assignee or other notification for: Global Electric, Inc.				
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Global Electric, Inc.				
ACCOUNT NO. unknown Holly Birkett C/O Law Office Of Larry Linder 2245 Commercial Street NE Salem, OR 97303		Precautionary				0.00
ACCOUNT NO. unknown Home Depot Credit Services POB 183175 Columbus, OH 43218		Precautionary				unknown
ACCOUNT NO. CitiBank POB 6235 Sioux Falls, SD 57117		Assignee or other notification for: Home Depot Credit Services				
ACCOUNT NO. 7574 HSBC POB 5259 Carol Stream, IL 60197		Credit card				536.00
ACCOUNT NO. Kramer & Associates 520 SW Sixth Avenue, Ste 1010 Portland, OR 97204		Assignee or other notification for: HSBC				

Sheet no. 7 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **536.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1015 International Emiarmenta Management 24516 Network Place Chicago, IL 60673	X	Business debt				298.00
ACCOUNT NO. 7458 JK Capital, Inc. C/O Donald Feltam, President 1 Walter Kratz Drive Jonesboro, AR 72401	X	Precautionary				unknown
ACCOUNT NO. 0733 Kaiser Permanente 500 NE Multnomah St., Suite 100 Portland, OR 97232		Medical debt				58.00
ACCOUNT NO. 38CV Kroll Johnson Attorneys At Law C/O Mindy Cardinal 6125 NE Cornell Rd., Ste 360 Hillsboro, OR 97124	X	Business debt Washington County Circuit Court Case No. C140938CV		X	X	unknown
ACCOUNT NO. Corbridge& Kroll Attorneys, LLC 19075 NW Tanasbourne Drive, Ste 100 Hillsboro, OR 97124		Assignee or other notification for: Kroll Johnson Attorneys At Law				
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Kroll Johnson Attorneys At Law				
ACCOUNT NO. 8134 Legacy Health POB 2787 Portland, OR 97208-2787		Medical debt				314.00

Sheet no. 8 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **670.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0791 Metroplex Pathology Assoc PO Box 840294 San Antonio, TX 78284-0294		Medical debt				1,092.00
ACCOUNT NO. 84CV Michael D. Walsh, Attorney At Law C/O Jeremy Dekar 21790 Willamette Dr., PO BOX 648 West Linn, OR 97068		Judgment Awarded Precautionary (claim amount \$0.00)				0.00
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Michael D. Walsh, Attorney At Law				
ACCOUNT NO. 2349 NCO Financial PO Box 15740 Wilmington, DE 19850		Unpaid services				3,035.00
ACCOUNT NO. 8549 NSA 4000 East Fifth Columbus, OH 43219		Unpaid services				30.00
ACCOUNT NO. unknown Oregon Heating & Air 19300 SW 118th Ave Tualatin, OR 97062		Unpaid services				unknown
ACCOUNT NO. 1596 Pacific Coast Credit 1730 Willow Creek Circ, Ste 200 PO Box 40580 Eugene, OR 97402-9152		Unpaid services				518.71

Sheet no. 9 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **4,675.71**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0032 Pacific Family Dental 17680 SW Handley St., Ste 101 Sherwood, OR 97140	X	Dental debt				2,994.00
ACCOUNT NO. American Northwest Recovery Solutions, Inc. PO 9235 Nampa, ID 83652		Assignee or other notification for: Pacific Family Dental				
ACCOUNT NO. unknown PGE POB 4438 Portland, OR 97208-4438	X	Business debt				1,211.25
ACCOUNT NO. Bonneville Collections Bankruptcy Department PO Box 150621 Ogden, UT 84415-0621		Assignee or other notification for: PGE				
ACCOUNT NO. unknown Portland Fixture, LP C/O Mercury Development 16390 SW Langer Dr. Sherwood, OR 97140	X	Guarantor on business lease				unknown
ACCOUNT NO. 4478 Preferred Credit POB 1679 Saint Cloud, MN 56302		Unpaid services				2,283.00
ACCOUNT NO. 7572 Professional Credit Service C/O Joseph R. Hawes, RA PO Box 7548 Springfield, OR 97475		Unpaid services				164.00

Sheet no. 10 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **6,652.25**

Total
(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Professional Credit Services 400 International Way Ste 100 Springfield, OR 97477		Unpaid services				285.00
ACCOUNT NO. unknown Promenade Nevada, LLC C/O Anthony J. Motschenbacher, RA Motschenbacher Blattner LLP, 117 SW Taylor St.# 200 Portland, OR 97204	X	Judgment Against Personal Residence 15901 SW Oriole Ct. Sherwood, OR 97140			X	0.00
ACCOUNT NO. Hillsboro Partners, LLC 1980 Willamette Falls Drive, Ste 200 West Linn, OR 97068		Assignee or other notification for: Promenade Nevada, LLC				
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Promenade Nevada, LLC				
ACCOUNT NO. Motschenbacher & Blattner, LLP 117 SW Taylor St., Ste 200 Portland, OR 97204		Assignee or other notification for: Promenade Nevada, LLC				
ACCOUNT NO. unknown Providence Business Office 1235 NE 47th Ave. #129 Portland, OR 97213		Medical debt				6,965.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Business Office				

Sheet no. 11 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **7,250.00**

Total
(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Providence Business Office 1235 NE 47th Ave. #129 Portland, OR 97213		Medical debt				140.00
ACCOUNT NO. 1232 Providence Health & Services PO Box 13993 Portland, OR 97213		Medical debt				1,649.57
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Health & Services				
ACCOUNT NO. unknown Providence Medical Group - Sherwood 16770 SW Edy Rd Sherwood, OR 97140		Medical debt				258.00
ACCOUNT NO. Professional Credit SE POB 87940 Vancouver, WA 98687		Assignee or other notification for: Providence Medical Group - Sherwood				
ACCOUNT NO. unknown Providence Medical Group - Sherwood 16770 SW Edy Rd Sherwood, OR 97140		Medical debt				174.00
ACCOUNT NO. Professional Credit SE POB 87940 Vancouver, WA 98687		Assignee or other notification for: Providence Medical Group - Sherwood				

Sheet no. 12 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **2,221.57**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Providence Medical Group - Sherwood 16770 SW Edy Rd Sherwood, OR 97140		Medical debt				84.00
ACCOUNT NO. Professional Credit SE POB 87940 Vancouver, WA 98687		Assignee or other notification for: Providence Medical Group - Sherwood				
ACCOUNT NO. unknown Providence Medical Group - Sherwood 16770 SW Edy Rd Sherwood, OR 97140		Medical debt				659.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Medical Group - Sherwood				
ACCOUNT NO. unknown Providence Medical Group - Sherwood 16770 SW Edy Rd Sherwood, OR 97140		Medical debt				395.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Medical Group - Sherwood				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				121.00

Sheet no. 13 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **1,259.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				93.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				161.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				910.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				

Sheet no. 14 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **1,164.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				472.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				569.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				485.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				4,578.00

Sheet no. 15 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **6,104.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				458.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				526.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				221.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				

Sheet no. 16 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **1,205.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				277.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				1,650.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				65.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				108.00

Sheet no. 17 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **2,100.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				5,897.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				286.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				253.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				

Sheet no. 18 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **6,436.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				848.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				113.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				112.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg 1001 Providence Drive Newberg, OR 97132		Medical debt				437.00

Sheet no. 19 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **1,510.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg				
ACCOUNT NO. unknown Providence Newberg Medical Center POB 3299 Portland, OR 97208		Medical debt				121.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg Medical Center				
ACCOUNT NO. unknown Providence Newberg Medical Center POB 3299 Portland, OR 97208		Medical debt				3,132.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Newberg Medical Center				
ACCOUNT NO. unknown Providence Physicians Business Offices POB 3158 Portland, OR 97208		Medical debt				133.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence Physicians Business Offices				

Sheet no. 20 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **3,386.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Providence St Vincent Medical Center 9205 SW Barnes Rd. Portland, OR 97225		Medical debt				472.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence St Vincent Medical Center				
ACCOUNT NO. unknown Providence St Vincent Medical Center 9205 SW Barnes Rd. Portland, OR 97225		Medical debt				2,159.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence St Vincent Medical Center				
ACCOUNT NO. unknown Providence St Vincent Medical Center 9205 SW Barnes Rd. Portland, OR 97225		Medical debt				87.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Providence St Vincent Medical Center				
ACCOUNT NO. 1993 Radiance Capital, LLC C/O Ms. Meryl Newman, CEO 820 A. Street, Ste 560 Tacoma, WA 98402	X	Precautionary				0.00

Sheet no. 21 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **2,718.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 1392 Regency Realty Group, Inc. C/O Corporation Service Company, RA 285 Liberty St NE Salem, OR 97301	X	Business lease debt				6,717.16
ACCOUNT NO. Williams Babbit & Weisman, Inc. 5255 North Federal Hwy, 3rd Floor Boca Raton, FL 33487		Assignee or other notification for: Regency Realty Group, Inc.				
ACCOUNT NO. unknown RJM Acquisitions LLC 575 Underhill Blvd, Suite 224 Syosset, NY 11791		Unpaid services				29.95
ACCOUNT NO. unknown ROIC Oregon, LLC C/O Corporation Service Company, RA 1127 Broadway Street NE Ste 310 Salem, OR 97301	X	Business lease delinquency				14,642.81
ACCOUNT NO. unknown Rose, Senders & Bovarnick, LLC 1205 NW 25th Ave Portland, OR 97210		Attorney's fees				1,316.00
ACCOUNT NO. 0642 Schwindt Richardson, LLC 621 SW Morrison St., Ste 700 Portland, OR 97205		Unpaid services				995.00
ACCOUNT NO. unknown Sherwood Family Medicine 20015 Southwest Pacific Hwy, #300 Sherwood, OR 97140		Medical debt				76.00

Sheet no. 22 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **23,776.92**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Sherwood Family Medicine				
ACCOUNT NO. Professional Credit SE POB 87940 Vancouver, WA 98687		Assignee or other notification for: Sherwood Family Medicine				
ACCOUNT NO. unknown Sherwood Family Medicine 20015 Southwest Pacific Hwy, #300 Sherwood, OR 97140		Medical debt				183.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Sherwood Family Medicine				
ACCOUNT NO. unknown Sherwood Family Medicine 20015 Southwest Pacific Hwy, #300 Sherwood, OR 97140		Medical debt				170.00
ACCOUNT NO. unknown Sherwood Family Medicine 20015 Southwest Pacific Hwy, #300 Sherwood, OR 97140		Medical debt				218.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Sherwood Family Medicine				

Sheet no. 23 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **571.00**

Total
(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. unknown Sherwood Family Medicine 20015 Southwest Pacific Hwy, #300 Sherwood, OR 97140		Medical debt				1,369.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Sherwood Family Medicine				
ACCOUNT NO. unknown Sherwood Family Medicine 20015 Southwest Pacific Hwy, #300 Sherwood, OR 97140		Medical debt				252.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Sherwood Family Medicine				
ACCOUNT NO. unknown Sherwood Family Medicine 20015 Southwest Pacific Hwy, #300 Sherwood, OR 97140		Medical debt				174.00
ACCOUNT NO. Columbia Collection Service, Inc. POB 22709 Milwaukie, OR 97269		Assignee or other notification for: Sherwood Family Medicine				
ACCOUNT NO. 52CV Spar Investment Company C/O Joseph Haddad, Attorney JJH Law, 351 NW 12th Ave Portland, OR 97209	X	Washington County Circuit Court Case No. C150652CV Breach of Contract				104,976.89

Sheet no. 24 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **106,771.89**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 91CV Stefanie Jacquemin 12873 SW Morningstar Dr. Tigard, OR 97223	X	Civil Negligence Lawsuit Washington County Circuit Court Case No. C135291CV		X	X	0.00
ACCOUNT NO. The Steele Law Firm 1051 NW Bond ST., Ste 320 Bend, OR 97701		Assignee or other notification for: Stefanie Jacquemin				
ACCOUNT NO. Washington County Circuit Court 150 N 1st Avenue Hillsboro, OR 97124		Assignee or other notification for: Stefanie Jacquemin				
ACCOUNT NO. 7050 The Radiology Group PO Box 215184 Portland, OR 97298		Medical debt				260.00
ACCOUNT NO. 2008 Timepayment Corporation C/O Corporation Service Company, RA 285 Liberty St. NE Salem, OR 97301	X	Precautionary				unknown
ACCOUNT NO. 1218 TRG, LLC Fka The Radiology Group POB 25180 Portland, OR 97298		Medical debt				667.00
ACCOUNT NO. 5411 US Bank 205 W. 4th St. Cincinnati, OH 45202		Precautionary				0.00

Sheet no. 25 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **927.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Integrity Solution Services 4370 W. 109th Street, Suite 100 Overland Park, KS 66211		Assignee or other notification for: US Bank				
ACCOUNT NO. unknown Vintage Place At McMinneville 911 NE Hwy 99W McMinnville, OR 97128	X	Guarantor on business lease				0.00
ACCOUNT NO. 8014 Wells Fargo POB 25341 Santa Ana, CA 92799		Credit card				1,995.00
ACCOUNT NO. 3416 Wells Fargo Capital Finance, LLC C/O Henry K. Jordan, CEO 2450 Colorado Avenue, 3rd Floor Santa Monica, CA 90404	X	Precautionary				0.00
ACCOUNT NO. Wells Fargo Capital Finance, LLC PO Box 4568 Federal Way, WA 98001		Assignee or other notification for: Wells Fargo Capital Finance, LLC				
ACCOUNT NO. unknown Wilsonville Town Center C/O Norris & Steven's 621 SW Morrison, Ste 800 Portland, OR 97205	X	Precautionary				unknown
ACCOUNT NO.						

Sheet no. 26 of 26 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **1,995.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.) \$ **213,724.03**

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Hillsboro Partners, LLC C/O Mark Handris 1980 Willamette Falls Drive, Ste 200 West Linn, OR 97068	Hillsboro location space lease (34 months remaining)
Timepayment Corporation C/O Corporation Service Company 1127 Broadway Street NE Ste 310 Salem, OR 97301	Laser Hair Equipment (3 months remaining)
The Vintage Place, LLC C/O Megan Floretta, RA 837 Lincoln St Eugene, OR 97401	McMinnville location space lease (business location sold)
Crossroads Plaza, LLC C/O Janet McCaslin, RA 9775 SW Commerce Circle, C3 Wilsonville, OR 97070	Newberg location space lease (business location sold)
Portland Fixture, LP C/O PFMGP, Inc., RA 16390 SW Langer Drive Sherwood, OR 97140	Sherwood location space lease (32 months remaining)
Aluli Real Estate Holdings, LLC C/O CT Corporation System, RA 388 State St., Ste 420 Salem, OR 97301	Tigard location space lease (24 months remaining)
ROIC Oregon, LLC C/O Corporation Service Company, RA 1127 Broadway Street NE Ste 310 Salem, OR 97301	Wilsonville location space lease (rejecting the lease)
SPM Wilsonville, LLC C/O Kenneth Antell, RA 851 SW Sixth Ave., Ste 1500 Portland, OR 97204-0000	

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Jason Crawford 15901 SW Oriole Ct. Sherwood, OR 97140	Pacific Family Dental 17680 SW Handley St., Ste 101 Sherwood, OR 97140
Kert Nass 14070 SW Odino Ct. Tigard, OR 97224	Portland Fixture, LP C/O Mercury Development 16390 SW Langer Dr. Sherwood, OR 97140
Ronnie Swyers 8551 SW Avon Street Tigard, OR 97224	Quick Collect Inc. C/O Ronald D. Thompson, RA 6308 SE Platt Ave Portland, OR 97236
The Newberg Ultimate Tan & Med Spa 15690 NE Oregon Street Sherwood, OR 97140	Promenade Nevada, LLC C/O Anthony J. Motschenbacher, RA Motschenbacher Blattner LLP, 117 SW Taylor St.# 200 Portland, OR 97204
The Ultimate Tan & Med Spa, LLC 15690 SW Oregon St.	Aluli Real Estate Holdings, Llc C/O Commercial Realty Advisors Nw, Llc 733 SW 2nd Ave, Ste 200 Portland, OR 97204
	Cornelius Retail Center, LLC PO Box 906 Beaverton, OR 97075-0906
	Spar Investment Company C/O Joseph Haddad, Attorney JJH Law, 351 NW 12th Ave Portland, OR 97209
	Metropolitan Agencies, Inc. C/O Kaye Fulmer, RA 316 N. Johnson McMinnville, OR 97128
	Crossroads Plaza Of Oregon, LLC PO Box 626 Wilsonville, OR 97070
	Bonstan Construction Company PO Box 32 Clackamas, OR 97015
	ROIC Oregon, LLC C/O Corporation Service Company, RA 1127 Broadway Street NE Ste 310 Salem, OR 97301
	Metropolitan Agencies, Inc. C/O Kaye Fulmer, RA

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Sherwood, OR 97140	316 N. Johnson McMinnville, OR 97128
	Promenade Nevada, LLC C/O Anthony J. Motschenbacher, RA Motschenbacher Blattner LLP, 117 SW Taylor St.# 200 Portland, OR 97204
	GE Capital POB 103104 Roswell, GA 30076
	Folawn Alterman & Richardson, LLP C/O Karen Nashiwa 805 SW Broadway, Ste 2750 Portland, OR 97205
	Cornelius Retail Center, LLC PO Box 906 Beaverton, OR 97075-0906
	Department Of Human Services 800 NE Oregon Street, Ste 640 Portland, OR 97232
	Dr. HVAC 1788 NE 18th St. McMinnville, OR 97128
	Frontier Communications POB 20550 Rochester, NY 14602
	International Emiarmenta Management 24516 Network Place Chicago, IL 60673
	PGE POB 4438 Portland, OR 97208-4438
	Portland Fixture, LP C/O Mercury Development 16390 SW Langer Dr. Sherwood, OR 97140
	Stefanie Jacquemin 12873 SW Morningstar Dr. Tigard, OR 97223
	Vintage Place At McMinneville 911 NE Hwy 99W McMinnville, OR 97128
	Wilsonville Town Center C/O Norris & Steven's 621 SW Morrison, Ste 800 Portland, OR 97205

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<p>The Ultimate Tan & Spa, LLC 15901 SW Oriole Ct. Sherwood, OR 97140</p>	<p>Washington County Tax & Assessment C/O Richard Hoernicht, Director 155 N 1st Ave Rm 130 Hillsboro, OR 97124</p> <p>Century Link PO Box 4300 Carol Stream, IL 60197-4300</p> <p>Bonstan Construction Company PO Box 32 Clackamas, OR 97015</p> <p>Attorney General of the United States C/O Loretta Lynch, Dept. Of Justice 10th & Constitution NW Washington, DC 20530</p> <p>The Tanning Bed Company C/O Pamela E. Yee, RA 18525 SW Vincent Aloha, OR 97007</p> <p>Summit Leasing, Inc. C/O Ken Mears PO Box 7 Yakima, WA 98907</p> <p>Kroll Johnson Attorneys At Law C/O Mindy Cardinal 6125 NE Cornell Rd., Ste 360 Hillsboro, OR 97124</p> <p>Spar Investment Company C/O Joseph Haddad, Attorney JJH Law, 351 NW 12th Ave Portland, OR 97209</p> <p>ROIC Oregon, LLC C/O Corporation Service Company, RA 1127 Broadway Street NE Ste 310 Salem, OR 97301</p> <p>Global Electric, Inc. C/O Justin Spiering, RA 15354 NW Mead LN North Plains, OR 97133</p> <p>Radiance Capital, LLC C/O Ms. Meryl Newman, CEO 820 A. Street, Ste 560 Tacoma, WA 98402</p> <p>JK Capital, Inc. C/O Donald Feltam, President 1 Walter Kratz Drive Jonesboro, AR 72401</p>

IN RE Crawford, Debra A.Case No. 15-31963-pcm13

Debtor(s)

(If known)

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<p>Ultimate Tan, LLC 2935 SE 73rd Ave Hillsboro, OR 97123</p>	<p>Spar Investment Company C/O Joseph Haddad, Attorney JJH Law, 351 NW 12th Ave Portland, OR 97209</p> <p>ROIC Oregon, LLC C/O Corporation Service Company, RA 1127 Broadway Street NE Ste 310 Salem, OR 97301</p> <p>Wells Fargo Capital Finance, LLC C/O Henry K. Jordan, CEO 2450 Colorado Avenue, 3rd Floor Santa Monica, CA 90404</p> <p>Timepayment Corporation C/O Corporation Service Company, RA 285 Liberty St. NE Salem, OR 97301</p> <p>Regency Realty Group, Inc. C/O Corporation Service Company, RA 285 Liberty St NE Salem, OR 97301</p> <p>Spar Investment Company C/O Joseph Haddad, Attorney JJH Law, 351 NW 12th Ave Portland, OR 97209</p> <p>ROIC Oregon, LLC C/O Corporation Service Company, RA 1127 Broadway Street NE Ste 310 Salem, OR 97301</p>

Fill in this information to identify your case:Debtor 1 Debra A. Crawford
First Name Middle Name Last NameDebtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of Oregon

Case number (if known) 15-31963-pcm13

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 6I**Schedule I: Your Income****12/13**

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status☒ Employed
☐ Not employed☐ Employed
☐ Not employed**Occupation**Owner**Employer's name**Self Employed**Employer's address**

Number Street

Number Street

City State ZIP Code

City State ZIP Code

How long employed there? 19 years**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00

3. Estimate and list monthly overtime pay.

3. + \$ 0.00

4. Calculate gross income. Add line 2 + line 3.

4. \$ 0.00

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... → 4.	\$ 0.00	\$
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$
5e. Insurance	5e. \$ 0.00	\$
5f. Domestic support obligations	5f. \$ 0.00	\$
5g. Union dues	5g. \$ 0.00	\$
5h. Other deductions. Specify: _____	5h. + \$ 0.00	+ \$
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 0.00	\$
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 7,200.00	\$
8b. Interest and dividends	8b. \$ 0.00	\$
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 600.00	\$
8d. Unemployment compensation	8d. \$ 0.00	\$
8e. Social Security	8e. \$ 0.00	\$
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$
8g. Pension or retirement income	8g. \$ 0.00	\$
8h. Other monthly income. Specify: _____	8h. + \$ 0.00	+ \$
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 7,800.00	\$
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 7,800.00 +	\$ = \$ 7,800.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
		11. + \$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		12. \$ 7,800.00 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: None		

Fill in this information to identify your case:

Debtor 1	Debra A. Crawford		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of Oregon			
Case number	15-31963-pcm13		
(If known)			

☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

12/13

Part 1: Describe Your Household

4d. \$ **0.00**

	Your expenses
5. Additional mortgage payments for your residence , such as home equity loans	5. \$ <u>0.00</u>
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ <u>300.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>102.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>200.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>
7. Food and housekeeping supplies	7. \$ <u>1,000.00</u>
8. Childcare and children's education costs	8. \$ <u>600.00</u>
9. Clothing, laundry, and dry cleaning	9. \$ <u>175.00</u>
10. Personal care products and services	10. \$ <u>200.00</u>
11. Medical and dental expenses	11. \$ <u>100.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>350.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>200.00</u>
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>0.00</u>
15b. Health insurance	15b. \$ <u>600.00</u>
15c. Vehicle insurance	15c. \$ <u>165.00</u>
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18. \$ <u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ <u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

21. **Other.** Specify: _____

21. +\$ 0.00

22. **Your monthly expenses.** Add lines 4 through 21.

The result is your monthly expenses.

22. \$ 5,500.43

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 7,800.00

23b. Copy your monthly expenses from line 22 above.

23b. - \$ 5,500.43

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$ 2,299.57

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

None

IN RE Crawford, Debra A.

Debtor(s)

Case No. 15-31963-pcm13

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 51 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: May 6, 2015 Signature: /s/ Debra A. Crawford
Debra A. Crawford

Debtor

Date: _____ Signature: _____
 (Joint Debtor, if any)
 [If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
District of Oregon**

IN RE:Case No. **15-31963-pcm13****Crawford, Debra A.**Chapter **13**

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101(2),(31).

1. Income from employment or operation of business

- None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
264,820.00	2015 YTD Gross Business Income
1,119,412.00	2014 Gross Business Income
37,500.00	2013 Gross Income
1,247,104.63	2013 Gross Business Income

2. Income other than from employment or operation of business

- None ☐ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
16,800.00	2013 Personal Injury Proceeds
8,000.00	2013 Proceeds from sale of Vehicle

3. Payments to creditors

Complete a. or b., as appropriate, and c.

None ☒ a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,255.* If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None ☒ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Mindy Cardinal vs. The Ultimate Tan & Med Spa, LLC Case No. C140938CV	Breach of Contract	Washington County Circuit Court	Pending
Spar Investment Company vs. The Ultimate Tan & Beauty Salon, dba The Ultimate Tan dba The Ultimate Tan & Spa, LLC dba The Ultimate Tan & Med Spa; Debra Nass aka Debra Crawford Case No. C150652CV	Breach of Contract	Washington County Circuit Court	Pending

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None ☐ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
Description: 2005 Forri Utility Trailer Value: \$1,000.00	Deceased husband's brother stole trailer	01/2015

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Muir & Troutman 16100 NW Cornell Road Ste 200 Beaverton, OR 97006	2014	2,789.34
001Debtorcc, Inc.	03/03/15	9.95
Troutman Law Firm, PC 5075 SW Griffith Drive, Ste 220 Beaverton, OR 97005-0000	04/22/15	4,000.00
Troutman Law Firm, PC 5075 SW Griffith Drive, Ste 220 Beaverton, OR 97005-0000	04/23/15	2,000.00

10. Other transfers

None ☐ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
Ronnie Swyers 20418 SE Hwy 212 Clackamas, OR 97015 N/A	04/2012 - 02/2013	Property Transferred: 2006 Chevy Suburban Value Received: \$8,000

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

- None ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

- None ☐ List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

- None ☐ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

- None ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

- None ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.
- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.
- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL- SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN SSN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
The Ultimate Tan & Med Spa		15690 SW Oregon St. Sherwood, OR 97140-0000	Tanning & Spa Services	04/2014 - present
The Ultimate Tan & Med Spa, LLC	93-1249197	15690 SW Oregon St.	Tanning / Spa	01/2010 - 04/2014

The Ultimate Tan & Spa, LLC	unknown	Sherwood, OR 97140-0000 15901 SW Oriole Ct. Sherwood, OR 97140-0000	Services Tanning salon	08/2009 - 10/2011
The Ultimate Tan & Spa, LLC	unknown	15901 SW Oriole Ct. Sherwood, OR 97140-0000	Tanning Salon	04/2006 - 06/2009

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None ☐ a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
Norma Barber Accounting And Tax, LLC	2011 - Present
11970 SW Lincoln Ave	
Portland, OR 97223	

None ☒ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None ☒ d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within the **two years** immediately preceding the commencement of this case.

20. Inventories

None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None ☒ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

21. Current Partners, Officers, Directors and Shareholders

None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

None ☒ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

22. Former partners, officers, directors and shareholders

None ☒ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

None ☒ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

23. Withdrawals from a partnership or distributions by a corporation

None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

24. Tax Consolidation Group

None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

25. Pension Funds.

None ☐ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **May 6, 2015** Signature /s/ Debra A. Crawford
of Debtor **Debra A. Crawford**

Date: _____ Signature _____
of Joint Debtor
(if any)

_____ **0** continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1167 filing fee, \$550 administrative fee: Total fee \$1717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

**United States Bankruptcy Court
District of Oregon**

IN RE:Case No. 15-31963-pcm13Crawford, Debra A.

Debtor(s)

Chapter 13

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Crawford, Debra A.

Printed Name(s) of Debtor(s)

X /s/ Debra A. Crawford

Signature of Debtor

5/06/2015

Date

Case No. (if known) 15-31963-pcm13**X**

Signature of Joint Debtor (if any)

Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.